

**Montana TY2007 E~File Test Packet**  
**Montana Test 9**

**Forms:** Form 2  
Form ENRG-C

**Name:** King, Sally 400-00-6825

**Dependents:**

Name	SSN	Relationship	Disabled
King, Frank	400-00-6853	Son	No

**Address:** PO Box 1232  
Bozeman, MT 59715

**Return Status:** Tax Due

**Filing Status:** 4 (Head of Household)

**Residency Status:** Resident Full Year

**Exemptions:** 1 Primary (yourself)  
1 Dependent  
2 Total

**Deduction:** Itemized Deduction

**Notes:** NAICS code should be 451120  
May DOR discuss return with preparer should be "Y"  
Taxpayer phone number should be (406) 444-6957  
**Tax Due amount is \$1123.00**